EAST ORANGE BOARD OF HEALTH REGULAR MEETING

East Orange Department of Health & Human Services 143 New Street East Orange, New Jersey 07017 May 17, 2022

MEETING MINUTES

Meeting Call to Order - 5:35 PM start at 29:11

Board President Christine Harris read the following **Sunshine Law**: This meeting, which conforms to the provisions of the Open Public Meeting Act, Chapter **231**, and Public Law of **1975** is a regular meeting of the City of East Orange Board of Health. Notices have been filed with our official newspaper, with the City Clerk, and posted on regular bulletin boards. The public is permitted to participate at this meeting.

Zoom Communication ID: 844 4149 3620

Meeting Link: https://us02web.zoom.us/j/84441493620?pwd=dEtkWWIxRndFTFpZa3ZZMVQ2bXEyUT09

After the roll call, it was determined there was a quorum to convene the meeting.

Board Members Present:

Christine Harris, President Horace H. Henry, Vice President Tobbia M. Corbitt Deanna Phillips Angela Jones-Williams Dr. Tonya X. Cook

Council Liaison:

Tameika Garrett-Ward - absent

Board of Health Counsel:

Attorney Aboubead Abuobead

Health Department Staff:

Dr. Griffith, HHS Director Victor Kuteyi, Health Officer Ms. Cedra Starks, Health Educator

Mayoral Staff:

None

Guests:

None

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Public in attendance:

None

Approval of April 19, 2022, Meeting Minutes:

Approved Unanimously

Dr. Griffith Updates:

Homelessness Initiatives

We are working on implementing a five-year strategic plan to examine aspects of homelessness, its exacerbating effects and those experiencing financial difficulty due to various loses. As an example, we have identified many families who reported the need for emergency childcare. To combat this, we are rolling out and developing an emergency childcare MOU with the YMCA. The MOU is evolving to ensure the capacity exists to support families in need. We are also working on additional resolutions related to the panhandling ordinances, code blue, code red, and the homelessness bill of rights. Those are all still pending and in draft form.

We are pivoting our focus on children to increase the level of support needed. There are other agreements in addition to the YMCA that you'll see evolving or emerging. We are also working with big entities, like Big Brother and Big Sister, to determine what level of support we can partner with. They already operate in the City, but again, it's a matter of capacity based upon the need we're seeing emerge.

President Harris asked for an update on the homelessness resource guide and initiatives. Dr. Griffith shared that the resource guide is still being developed as the information and contacts included must be vetted before printing and disseminating another version. Many agencies were impacted and subsequently closed due to COVID. There are several agencies that we have not been able to contact. So, the team is still trying to reach out to them to see if they're still operational while assessing whether the resources they provided before the pandemic are still available.

Dental Clinic Closure

We closed our dental program and are currently transitioning to expanding our HIV program, merging it with our STD clinic. The dental equipment will be donated to a facility within the City that is in need and serves to educate individuals who want to enter the field of dentistry.

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Dr. Cook inquired as to why the dental clinic was closed. Dr. Griffith explained that the use of the program was low as the caseload declined significantly after COVID, and never recovered. In addition, we don't believe the closure will leave a significant gap in community services

because multiple dental practices have emerged within the community, providing similar support.

Trustee Corbitt asked if the other dental entities are providing those services at an affordable, amenable cost to our residents. Dr. Griffith stated yes, an assessment was conducted prior to making that decision which outlined entities offering similar services. One such entity is NCHC. They have a sliding scale, but for those who can't pay out of pocket or the rate, there are multiple subsidies they can offer as an FQHC. Academy Dental also provides additional support by catering to residents based on their financial status.

Dr. Cook expressed disappointment in the dental clinic being closed, as the dental aspect was one of the primary reasons she joined the Board. Dr. Cook stated she does not remember the inclusion of the Board regarding discussions of the clinic closure. Dr. Griffith stated that the possible closure of the dental clinic was discussed in past BOH meetings.

President Harris inquired if a lack of publicity and program awareness contributed to the clinic closure. Dr. Griffith stated she doesn't doubt that was a factor.

Social Worker

President Harris mentioned in last month's meeting that Dr. Griffith spoke about social work activities and asked if we need to have a licensed social worker in the Department? And if so, can we create that position? Dr. Griffith shared that the individual, who is no longer with us, was a licensed social worker. There is now a vacancy, and we are working with HR to take the steps necessary to hire at least one licensed social worker.

HO Kuteyi Updates:

HIV/STD Clinic

President Harris asked if there was a significant incident of STDs or HIV? HO Kuteyi shared that more recently, we have seen an uptick in the number of clients registered at the HIV clinic since COVID-19.

Vaccination Efforts

HO Kuteyi shared that the vaccine program is going very well. The numbers are variable, with some days being busier than others and we are sometimes short on nurses due to the varied clinic schedules but managing by utilizing nurses from Best Care College.

HO Kuteyi shared the vaccination stats by age demographics. Residents aged 65 years and older, 82% fully vaccinated; aged 18 years and older, 70% fully vaccinated; ages 12-17 years,

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68% fully vaccinated; and, aged 5-11, 63% fully vaccinated. HO Kuteyi shared that Imani Cabrera and other HD staff have also continued to schedule homebound vaccinations. We gradually see higher numbers of fully vaccinated residents based on the data. President Harris remarked

that about 75% of our population is fully vaccinated and thanked the Department for its tremendous efforts toward achieving herd immunity.

United Way Funding

HO Kuteyi shared that we received additional funding from the United Way designated to COVID 19 vaccination education. Our education team will be well supported financially based on these grants, which were gifts, and were not solicited through our traditional means.

WIC

President Harris asked if Ms. Blue expressed any concerns regarding the recent baby formula shortage. HO Kuteyi shared that he hasn't received any communication affecting the WIC program, which is usually sufficiently stocked. The Program has access to State resources and support when their resources are in danger of being depleted. HO Kuteyi stated he would continue monitoring the program and make the BOH aware if any issues arose.

Administrative Committee

President Harris asked if there would be a need for an administrative hearing committee for the Board to address Cottage Industry violations. HO Kuteyi stated he believes there should be. The State has provisions for the Committee and hearings. It is essential to have a committee to address issues as they arise, particularly in cases where violations lead to the HD shutting down a food-based operation. The Committee will allow business owners an avenue to relay their case and be provided solutions for remediation.

Trustee Corbitt stated there needs to be something more definitive in place regarding what the Committee looks like, the responsibility of the hearings deflecting back to the Board as stipulated in the ordinance, and its rollout. Trustee Corbitt also mentioned that before COVID, a constituent came to many BOH meetings to air out her grievances.

Vice President Henry and Trustee Phillips recalled the constituent. They stated that having the entire Board present allowed them to listen as a collective and draw on their diverse expertise to offer solutions for remediation. Board members shared that each member already represents the interests of each ward, making them sufficient as members of the Committee.

President Harris concurred, stating the Committee may consist of the entire Board or one-two persons appointed by the BOH to provide an opportunity for the violator to discuss the facts concerning the violations. From there, we can identify the nature and scope of the violation and clarify any misunderstandings between the inspector and the violator, making it easy for

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the mediator to encourage both parties to work together towards resolving the disagreement. Agreeing swiftly can minimize the timeline a business is shut down. There are instances where a business is cited, and an extended shut down may impact their survival ability, with some

businesses never recovering. President Harris asked if HO Kuteyi could write a process for the Board to follow or outline how to address some of the complaints that may come forward. HO Kuteyi stated he would do so.

Attorney Aboubead Updates:

Cosmetology, Barbershop, & Nail Salon Ordinances

President Harris asked if HO Kuteyi shared the updated ordinances with Legal. Attorney Abuobead stated she had received the updated ordinances. Attorney Abuobead shared that the ordinances will be presented at the following Health & Education Committee Meeting in preparation for the City Council agenda and floor.

Cannabis Ordinance

Attorney Abuobead shared that the City sought outside legal counsel proficient in cannabis-related matters to manage cannabis as we advance. Attorney Aboubead stated she is unsure if the counsel has signed their contract yet or where they are in the process of drafting cannabis-related policy. Attorney Aboubead stated she would connect the cannabis counsel with Dr. Griffith so they can answer any questions the HD or BOH may have.

President Harris asked if there were any updates to the last ordinance. Attorney Aboubead stated there were no amendments to the last cannabis ordinance.

President Harris asked if there had been any review of cannabis retail locations in proximity to schools. Attorney Aboubead stated that would be a question for the Planning Director, Ms. Tiffany Harris-Delaney, and suggested the Board invite her and the outside counsel to the next BOH meeting. President Harris asked if there is an understanding that other department heads are invited to our meetings. Dr. Griffith stated they understand, but it's usually by invitation as they manage their committee meetings.

President Harris asked if the attorney is already working on or has concluded the marijuana ordinance. Attorney Aboubead remarked that the Council approved the ordinance with its amendments before the outside counsel came on Board. Still, we will have ongoing matters related to cannabis, requiring an expert attorney. The initial ordinances were drafted to meet the initial deadline to opt-in but may receive amendments based on the findings of the outside counsel.

President Harris asked BOH members to review the last amended adult recreational marijuana ordinance so we can have our questions together to discuss at the next meeting.

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Health Educator Updates:

President Harris welcomed Ms. Starks to the Department and asked her to introduce herself to the BOH. Ms. Starks shared that she is a native of New York City and worked a few years at the Department of Education; has a

public health background and is a graduate of Lincoln University. Ms. Starks expressed happiness working for the Health Department as it allows her to fulfill the goal of working in the same community she resides. Ms. Starks shared her enthusiasm in seeing what she can accomplish for the community, especially coming from a bigger city, and hopes to gain additional experience while helping make East Orange a healthier community.

President Harris expressed gratitude for Ms. Starks' arrival.

Community Survey

Dr. Griffith shared that more information is needed to clarify what's occurring and the State of the community since the onset of COVID. Different agencies, including our local and area hospitals, have distributed surveys; however, they have a low response rate from East Orange, which inhibits our ability to assess the impact of COVID on our residents. So, to gauge where our community is after two years of experiencing and enduring COVID, we're working to develop programming to meet the community's needs. To bring this effort to fruition, we have developed a community survey that will allow us to capture that data post COVID. Dr. Griffith deferred to Ms. Starks to share additional details regarding the survey.

Ms. Starks shared that the survey she has been developing primarily targets COVID impact and recovery, understanding how the EO community was affected. In particular, we want to understand how residents within zip codes were disproportionately impacted by job loss, unemployment, and things of that nature. The survey aims to zero in on individuals facing housing insecurity, those who are retired or nearing retirement age, and more while addressing the community's needs.

Ms. Starks shared that she reviewed past community needs assessments to compile information from those sources, partners, and local hospitals to see what they've reported. In addition, information was gathered directly from residents in EO, precisely due to the lack of local response, which may not necessarily capture information specific to EO.

Ms. Starks shared that data related to homelessness also came up during her research. Ms. Starks stated that the preemptive implementation of programs addressing homelessness would make its impact less severe for the community in another pandemic. This research can inform future program planning directly targeting COVID recovery and how we respond to the community's needs based on the information provided. It will also allow us to perform a temperature check on how residents feel about the vaccine, the pandemic, and the sources from which they get medical information. So, we are creating an excellent plan for rollout. The

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survey will be electronic, and the Department will utilize various forms of technology to facilitate the rollout.

President Harris commented that the plan sounds great. Dr. Griffith shared that she and Ms. Starks have been conversing about what questions should be asked, how the questions are formatted, and what areas we would like to target. Once the final tweaks are made, we will disseminate the survey to the BOH to obtain feedback. Specifically, on items such as the survey length, the questions' nature, and any questions that may arise when reading instructions or the labeling associated with the different survey sections.

Dr. Griffith shared plans to pilot the survey with the Board before disseminating it to the larger community. The goal related to the data collection effort ties into the COVID clinics where Ms. Starks, or a team that she will be training to collect. Then, the team will be visiting the COVID clinics with tablets, collecting the information. We do have a means of translating the survey and engaging with the population, even those who don't have their own technology, because we will also provide a QR code so that individuals can use their own devices. And so, for those that do not have a QR code, the goal will be to ensure that we provide our tablets so they can still access the survey and then branch out a little bit more and attend different community events to continue to gather information. So, the sampling will target a broad audience, not just individuals who decide to visit one of our COVID clinics.

President Harris asked if there was a timeline for the completion of the survey, its dissemination to the BOH, and reports documenting any findings. Dr. Griffith explained that the BOH would receive a report once the information is gathered to ensure the data is adequately analyzed before it is reported. We would also take the analyzed data to modify the survey based on additional questions we couldn't ask or the trends that emerged during this first data collection phase. But the BOH will continually be updated as things progress.

Ms. Starks stated the survey is in its final draft stages and will be shared as soon as possible, but we're ready to go to train staff. We're in quarter two right now. We decided on checkpoints of two to three months between these quarters to allow for adjustments to the survey, technical issues, or missing questions that may cause a shift in responses.

The survey created using Google forms generates a report from the collected data and has the capability of being formatted into pie charts. The data can also be detailed by demographic information, which we split into age groups. So, there are going to be hard data points collected. Dr. Griffith shared that we have an agreement with Google to ensure that the system and platform we have access to are HIPAA compliant. All collected information will be maintained on a confidential server based on the contract and the agreements we have with Google. Also, when we see responses, they may align with how we need to move forward or adjust questioning. But the general timeline would be providing updates as needed based on the information collected quarterly and updating the survey for any technical issues.

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President Harris commended the Department for their work and remarked that for the first survey completion, we would get a preliminary report within the first quarter, which should be June or September, depending on the rollout. So, it's a lot of work, but it's going to be very

informative, and certainly, it's going to be very useful.

Open Discussion

Undocumented Residents

President Harris mentioned the possibility of an influx of undocumented individuals entering the City. President Harris asked if we are making any health-related preparations in anticipation of their possible arrival. Dr. Griffith stated they would not change the service delivery and will continue to monitor the situation. We constantly collaborate with the other departments. So, if there is knowledge of an influx, as a concern expressed by the Board of Health, we would certainly respond to it. If it does become something that serves to compromise or deplete existing resources within the City, we would certainly respond to that from a public health standpoint. But as of now, there aren't reasons to believe there is a situation that we need to highlight or alert the Board.

HD Appointment to the Marijuana Commission

President Harris asked if there were any updates regarding an appointment to the marijuana commission from anyone within the HD. Dr. Griffith shared that she had no updates.

Food Truck Vendors

President Harris asked if there was any conclusion to the hot dog truck issue mentioned at the last BOH meeting. HO Kuteyi stated he inspected the truck, but he hadn't seen the truck since the inspection. Trustee Corbitt stated a new hot dog truck is near the Nassau school on Central Ave. HO Kuteyi stated he would have one of the inspectors check it out tomorrow. President Harris stated we are not against people having food trucks, but we don't want them to cause our brick-and-mortar retail food establishments to shutter. Board members noted that other food trucks have parked in front of existing retail food establishments, causing them to go out of business because their wares were similar. Dr. Griffith stated that HO Kuteyi had been engaged in evaluating where food trucks are stationed and reviewing legislation and zoning to identify areas where they can operate.

I&I Vaccine

Trustee Jones-Williams asked if the J&J vaccine is still being offered. HO Kuteyi stated that we offer all three vaccines (Pfizer, Moderna, and J&J). However, some individuals shy away from J&J because of the earlier mishaps. Still, others continue to ask for the vaccine exclusively.

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At the conclusion of Board business, President Harris adjourned the meeting at $6:49~\mathrm{pm}.$

Respectfully submitted, Jo-Ann Mills Board Clerk